

Fill in this information to identify the caseDebtor name C.B. Services, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXASCase number 18-41527
(if known)☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets -- Real and Personal Property****12/15**

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents**1. Does the debtor have any cash or cash equivalents?**

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand**3. Checking, savings, money market, or financial brokerage accounts** *(Identify all)*

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. <u>Veritex Bank</u>	<u>Checking account</u>	<u>9</u> <u>6</u> <u>6</u> <u>0</u>	<u>\$43,514.33</u>
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4. Other cash equivalents *(Identify all)*

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$43,514.33**Part 2: Deposits and prepayments****6. Does the debtor have any deposits or prepayments?**

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Debtor **C.B. Services, Inc.**
NameCase number (if known) **18-41527**Current value of
debtor's interest**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$0.00**Part 3: Accounts receivable****10. Does the debtor have any accounts receivable?**☐ No. Go to Part 4.☒ Yes. Fill in the information below.Current value of
debtor's interest**11. Accounts receivable**

11a. 90 days old or less:	<u>\$61,368.75</u>	—	<u>\$0.00</u>	= →	<u>\$61,368.75</u>
	face amount		doubtful or uncollectible accounts			

11b. Over 90 days old:	<u>\$165,317.20</u>	—	<u>\$0.00</u>	= →	<u>\$165,317.20</u>
	face amount		doubtful or uncollectible accounts			

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$226,685.95**Part 4: Investments****13. Does the debtor own any investments?**☒ No. Go to Part 5.☐ Yes. Fill in the information below.Valuation method
used for current valueCurrent value of
debtor's interest**14. Mutual funds or publicly traded stocks not included in Part 1**

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of ownership:

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00**Part 5: Inventory, excluding agriculture assets****18. Does the debtor own any inventory (excluding agriculture assets)?**☒ No. Go to Part 6.☐ Yes. Fill in the information below.

Debtor **C.B. Services, Inc.** Case number (if known) **18-41527**
 Name

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
23. Total of Part 5 Add lines 19 through 22. Copy the total to line 84.				\$0.00
24. Is any of the property listed in Part 5 perishable?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____				
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6. Add lines 28 through 32. Copy the total to line 85.			\$0.00
34. Is the debtor a member of an agricultural cooperative?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

Debtor **C.B. Services, Inc.**
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37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
40. Office fixtures			
Office fixtures			\$100.00
41. Office equipment, including all computer equipment and communication systems equipment and software			
2 Computers and printer			\$500.00
42. Collectibles <i>Examples:</i> Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			
43. Total of Part 7. Add lines 39 through 42. Copy the total to line 86.			\$600.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1. 1987 Mack Water Truck		Liquidation	\$4,000.00
47.2. 1995 Ford F800 (approx. 55,437 miles)		Liquidation	\$12,000.00
47.3. 1996 Ford F250 (approx. 291,386 miles)		Liquidation	\$675.00
47.4. 1997 Ford F450 (approx. 200,000 miles)		Liquidation	\$3,000.00
47.5. 1999 Ford F350 (approx. 296,898 miles)		Liquidation	\$1,500.00
47.6. 2000 Ford Excursion (approx. 520,185 miles)		Liquidation	\$1,400.00
47.7. 2000 Ford F250 (approx. 532,218 miles)		Liquidation	\$1,050.00
47.8. 2000 Ford F250 (approx. 392,790 miles)		Liquidation	\$6,850.00

Debtor C.B. Services, Inc.	Case number (if known) 18-41527
Name	

47.9. 2000 Ford F650 (approx. 177,426 miles)	Liquidation	\$6,000.00
47.10. 2000 Ford F650 (approx. 205,427 miles)	Liquidation	\$5,000.00
47.11. 2000 Ford Tractor (approx. 531,967 miles)	Liquidation	\$10,500.00
47.12. 2001 Ford Excursion (approx. 400,000 miles)	Liquidation	\$1,850.00
47.13. 2004 Ford F150 (approx. 350,000 miles)	Liquidation	\$900.00
47.14. 2006 Ford F650 (approx. 295,668 miles)	Liquidation	\$12,000.00
47.15. 2007 Ford Expedition (approx. 146,096 miles)	Liquidation	\$2,100.00
47.16. 2008 Ford F350 (approx. 248,865 miles)	Liquidation	\$15,000.00
47.17. 2010 Ford Expedition (approx. 120,000 miles)	Liquidation	\$7,500.00
47.18. 1993 Great Dane Trailer	Liquidation	\$9,000.00
47.19. 1995 Fontaine Trailer	Liquidation	\$9,000.00
47.20. 1996 Utility Trailer	Liquidation	\$15,000.00
47.21. 2006 Hefty Trailer	Liquidation	\$3,000.00
47.22. 2006 Hefty Trailer	Liquidation	\$3,000.00
47.23. 2011 Hefty Trailer	Liquidation	\$4,500.00

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats
trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

Mustang hydraulic hammer, Manitex truck crane mounted on a 1995 Ford chassis, 3 Dry American auger boring machine, Stanley hydraulic breaker, Link-belt rough terrain crane with winches, Bobcat skid steer loader, Caterpillar loader backhoe, 2 LeRoi air compressors, John Deere generator set, Schwing concrete trailer pump, McLaughlin auger boring machine, Link-belt rough terrain crane, John Deere 4x4 loader backhoe, Deere hydraulic excavator, John Deere wheel loader, John Deere Skid Steer loader, Caterpillar hydraulic excavator, Hitachi Hydraulic excavator, MultiQuip portable gen set, and Akkerman pipe jacking equipment

\$336,239.48

51. **Total of Part 8.**
Add lines 47 through 50. Copy the total to line 87.

\$471,064.48

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

☒ No
☐ Yes

Debtor **C.B. Services, Inc.**
NameCase number (if known) **18-41527****Part 9: Real property****54. Does the debtor own or lease any real property?**

- ☐ No. Go to Part 10.
- ☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property
Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.

Nature and extent of debtor's interest in property

Net book value of debtor's interest
(Where available)

Valuation method used for current value

Current value of debtor's interest

55.1.	101 W. Oakdale Road Grand Prairie, TX 75050 Land in Grand Prairie, TX *value listed is Debtor's best estimate	Fee Simple		\$125,000.00
55.2.	Oil & Gas Lease with GHA Barnett, LLC *value listed is estimated average amount of royalties received per year	Royalties		\$3,500.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$128,500.00**57. Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
- ☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
- ☐ Yes

Part 10: Intangibles and Intellectual Property**59. Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.
- ☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites			
62. Licenses, franchises, and royalties			
63. Customer lists, mailing lists, or other compilations			
64. Other intangibles, or intellectual property			
65. Goodwill			

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

Debtor **C.B. Services, Inc.**
NameCase number (if known) **18-41527**

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

Commerical general liability insurance policy with Cincinnati Casualty Company	\$0.00
Automobile liability insurance policy with Cincinnati Casualty Company	\$0.00
Umbrella liability insurance policy with Cincinnati Casualty Company	\$0.00
Equipment floater policy for leased/rented and scheduled equipment with Cincinnati Casualty Company	\$0.00
Workers compensation and employers' liability insurance policy with Texas Mutual Insurance Company	\$0.00

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Claim pending against EMC Insurance, 717 Mulberry St., Des Moines, IA 50309, a bonding company, for unpaid work performed by Debtor	\$69,120.00
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Nature of claim	Unpaid services performed by Debtor
Amount requested	\$69,120.00

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

Trophy Club membership	\$5,300.00
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78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$74,420.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Debtor **C.B. Services, Inc.**
NameCase number (if known) **18-41527****Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$43,514.33</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$226,685.95</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$600.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$471,064.48</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<u>\$128,500.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>+\$74,420.00</u>	
91. Total. Add lines 80 through 90 for each column. 91a.	<u>\$816,284.76</u>	91b. <u>\$128,500.00</u>
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		<u>\$944,784.76</u>

Fill in this information to identify the case:

Debtor name C.B. Services, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS

Case number (if known) 18-41527

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
\$50,807.53	\$944,784.76

2.1 Creditor's name Dallas County Describe debtor's property that is subject to a lien Ad Valorem Taxes

Creditor's mailing address 2777 N. Stemmons Freeway Describe the lien Property Taxes / Statutory Lien

Suite 1000

Dallas TX 75207 Is the creditor an insider or related party?
☒ No
☐ Yes

Creditor's email address, if known _____

Date debt was incurred 2016 - 2018 Is anyone else liable on this claim?
☒ No
☐ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Last 4 digits of account number _____ As of the petition filing date, the claim is:
Check all that apply.
☐ Contingent
☐ Unliquidated
☒ Disputed

Do multiple creditors have an interest in the same property?
☒ No
☐ Yes. Specify each creditor, including this creditor, and its relative priority.

Value listed as per Proof of Claim No. 1 filed on July 17, 2018

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.**\$665,913.17**

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
**Value of collateral
 that supports
 this claim**

2.2	Creditor's name Dallas County Tax Assessor	Describe debtor's property that is subject to a lien Ad Valorem Taxes	\$13,231.67	\$944,784.76
	Creditor's mailing address 1201 Elm Street, Ste. 2600	Describe the lien Property Taxes		
	Dallas TX 75270	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred Est. 2018	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines			
2.3	Creditor's name FGMS Holdings, LLC	Describe debtor's property that is subject to a lien Tracts 16 and 17, 101 W. Oakdale Road, Grand Prair	\$6,578.69	\$125,000.00
	Creditor's mailing address 8401 Datapoint Drive, Ste. 1000	Describe the lien Property Tax Lien / Statutory Lien		
	San Antonio TX 78229	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred 2017	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number			
	Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines			
	Per liens filed Dallas County Property Records: \$3,709.64 owed on Tract 16 \$2,869.05 owed on Tract 17			

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 1: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
**Value of collateral
 that supports
 this claim**

2.4	Creditor's name <u>Internal Revenue Service</u> Creditor's mailing address <u>PO Box 7346</u> <u>Philadelphia PA 19101-7346</u> Creditor's email address, if known Date debt was incurred <u>2016 - 2017</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Real and Personal Property</u> Describe the lien <u>941 Taxes / Statutory Lien</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$320,577.96</u>	<u>\$944,784.76</u>
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Value listed as per IRS Proof of Claim No. 5 filed on July 18, 2018

2.5	Creditor's name <u>Irving ISD</u> Creditor's mailing address <u>2777 N. Stemmons Freeway</u> <u>Suite 1000</u> <u>Dallas TX 75207</u> Creditor's email address, if known Date debt was incurred <u>2017 - 2018</u> Last 4 digits of account number _____ Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____	Describe debtor's property that is subject to a lien <u>Ad Valorem Taxes</u> Describe the lien <u>Property Taxes / Statutory Lien</u> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H) As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	<u>\$17,077.14</u>	<u>\$944,784.76</u>
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Value listed as per Proof of Claim No. 2 filed on July 17, 2018

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 1: Additional Page**

Column A
Amount of claim
 Do not deduct the
 value of collateral.

Column B
**Value of collateral
 that supports
 this claim**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.6

Creditor's name
Peoples United Equipment Finance

**Describe debtor's property that is
 subject to a lien**

\$257,640.18**\$944,784.76**

Creditor's mailing address
1300 Post Oak Blvd., Ste. 1300

Equipment**Describe the lien****Agreement**

Houston TX 77056

Is the creditor an insider or related party?

- ☒ No
☐ Yes

Creditor's email address, if known**Is anyone else liable on this claim?**

- ☐ No
☒ Yes. Fill out *Schedule H: Codebtors* (Official Form 206H)

Date debt was incurred **12/08/2014**

**Last 4 digits of account
 number**

As of the petition filing date, the claim is:

Check all that apply.

**Do multiple creditors have an interest in
 the same property?**

☒ No

☐ Yes. Have you already specified the
 relative priority?

☐ No. Specify each creditor, including this
 creditor, and its relative priority.

☐ Yes. The relative priority of creditors is
 specified on lines _____

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Value listed as per Proof of Claim No. 4 filed on July 18, 2018

Fill in this information to identify the case:

Debtor C.B. Services, Inc.

United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXAS

Case number 18-41527
(if known)

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part.

If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

Total claim Priority amount

2.1 Priority creditor's name and mailing address

Internal Revenue Service

PO Box 7346

Philadelphia PA 19101-7346

Date or dates debt was incurred

2017 - 2018

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(8)

Value listed as per IRS Proof of Claim No. 5 filed on July 18, 2018

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

941 Taxes

Is the claim subject to offset?

- ☒ No
☐ Yes

\$65,773.93

\$65,773.93

2.2 Priority creditor's name and mailing address

Texas Comptroller of Public Accounts

Franchise Tax Section

P.O. Box 149348

Austin TX 78714-9348

Date or dates debt was incurred

2018

Last 4 digits of account
number

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(8)

As of the petition filing date, the
claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Franchise Taxes

Is the claim subject to offset?

- ☒ No
☐ Yes

\$15,717.03

\$15,717.03

Debtor C.B. Services, Inc.Case number (if known) 18-41527**Part 1: Additional Page**

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.3 Priority creditor's name and mailing addressAs of the petition filing date, the claim is: *Check all that apply.*\$0.00\$0.00Texas Workforce Commission101 E. 15th St., Room 370

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Austin TX 78778-0001

Basis for the claim:

Workers Compensation

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account
number

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured
claim: 11 U.S.C. § 507(a)(8)

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.1</div> Nonpriority creditor's name and mailing address A G C OF TEXAS P.O. BOX 2185 AUSTIN TX 78768 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$972.95
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.2</div> Nonpriority creditor's name and mailing address Advance Kwik Lube 3415 N. Beltline Rd. Irving TX 75062 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$114.92
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.3</div> Nonpriority creditor's name and mailing address AMTEK INFORMATION SERVICE P.O. BOX 1832 TOMBALL TX 77377-1832 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,217.79

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.4</div>	Nonpriority creditor's name and mailing address BELL NUNNALLY 3232 MCKINNEY AVE., STE 1400 DALLAS TX 75204-2429 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Legal Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$11,913.10
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.5</div>	Nonpriority creditor's name and mailing address Charles Bishop 540 Indian Creek Trophy Club TX 76262 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Personal Loans Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$90,728.64
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.6</div>	Nonpriority creditor's name and mailing address CORNWELL JACKSON, PLLC 6865 WINDCREST DR., STE. 100 PLANO TX 75024 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,700.00
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.7</div>	Nonpriority creditor's name and mailing address CRANE INSPECTORS INC. P.O. BOX 451 KRUM TX 76249 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$400.00

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.8</div>	Nonpriority creditor's name and mailing address DICKERSON CONST. CO., INC. P.O. BOX 181 CELINA TX 75009 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,086.00
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.9</div>	Nonpriority creditor's name and mailing address DON TIDWELL'S P.O. BOX 226504 DALLAS TX 75222-6504 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,435.63
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.10</div>	Nonpriority creditor's name and mailing address EXPRESS CARE OF IRVING 3415 N. BELTLINE RD. IRVING TX 75062 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$463.60
<div style="border: 1px solid black; padding: 2px; width: 40px; text-align: center;">3.11</div>	Nonpriority creditor's name and mailing address F & R MACHINE SERVICES, INC. 7217 HARRY HINES BLVD. DALLAS TX 75235 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$893.07

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12 Nonpriority creditor's name and mailing address**FEDERAL EXPRESS CORP.****P.O. BOX 660481****DALLAS TX 75266-0481**

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**\$65.43****3.13** Nonpriority creditor's name and mailing address**FRONTIER COMMUNICATIONS****P.O. BOX 740407****CINCINNATI OH 45274-0407**

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**\$287.63****3.14** Nonpriority creditor's name and mailing address**FT. WORTH WATER DEPARTMENT****P.O. BOX 870****FORT WORTH TX 76101-0870**

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**\$390.33****3.15** Nonpriority creditor's name and mailing address**GRAINGER****DEPT. 802382820****PALATINE IL 60038-0001**

Date or dates debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is:

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Basis for the claim:

Goods and/or Services

Is the claim subject to offset?

☒ No☐ Yes**\$29.82**

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.16 Nonpriority creditor's name and mailing address Hayden Trucking 11540 Eagle Vista Dr. Ft Worth TX 76179 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,250.00
--	--	-------------------

3.17 Nonpriority creditor's name and mailing address Internal Revenue Service PO Box 7346 Philadelphia PA 19101-7346 Date or dates debt was incurred 2017 - 2018 Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Penalties on unpaid IRS taxes Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,150.94
---	--	-------------------

Value listed as per IRS Proof of Claim No. 5 filed on July 18, 2018

3.18 Nonpriority creditor's name and mailing address JACK RAY & SONS OIL CO. P.O. BOX 153553 IRVING TX 75015 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$60,686.64
--	--	--------------------

3.19 Nonpriority creditor's name and mailing address Manuel Viera 3317 Finley Road, Ste. 104 Irving TX 75062 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Workers Compensation Claim Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
--	---	---------------

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.20</div>	Nonpriority creditor's name and mailing address Margaret Bishop 540 Indian Creek Trophy Club TX 76262 Date or dates debt was incurred 2016 - 2017 Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Personal Loans Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$175,000.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.21</div>	Nonpriority creditor's name and mailing address METROPLEX WELDING SUPPLY INC. 1970 W. NORTHWEST HWY. DALLAS TX 75220 Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,428.29
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.22</div>	Nonpriority creditor's name and mailing address Morris & Tully Property Tax Service P.O. Box 561071 Dallas TX 75356-1071 Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$872.80
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.23</div>	Nonpriority creditor's name and mailing address NORTHEAST SERVICE, INC. P.O. BOX 1185 KENNEDALE TX 76060 Date or dates debt was incurred <u> </u> Last 4 digits of account number <u> </u> <u> </u> <u> </u> <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,421.78

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.24</div> Nonpriority creditor's name and mailing address NUCA of Texas, Inc. P.O. BOX 331694 FORT WORTH TX 76163-1694 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,300.00
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.25</div> Nonpriority creditor's name and mailing address Q.F.C. P.O. BOX 441 WEATHERFORD TX 76086 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$44,444.74
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.26</div> Nonpriority creditor's name and mailing address REPUBLIC SERVICES #794 P.O. BOX 78829 PHOENIX AZ 85062-8829 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$241.78
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.27</div> Nonpriority creditor's name and mailing address STUART HOSE & PIPE COMPANY 701 RIVERSIDE DR. FORT WORTH TX 76111 Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Goods and/or Services Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,774.81

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 2: Additional Page**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.28 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.***\$900.00****U S TREN-TECH LLC****828 HOWELL DR.**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

COPPELL TX 75019**Goods and/or Services**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

3.29 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.***\$1,947.16****UNIFIRST HOLDINGS, INC.****200 N. SAM HOUSTON RD.**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

MESQUITE TX 75149**Goods and/or Services**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Proof of Claim No. 6

3.30 Nonpriority creditor's name and mailing addressAs of the petition filing date, the claim is:
*Check all that apply.***\$305.98****UNITED SITE SERVICES****P.O. BOX 660475**

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

DALLAS TX 75266-0475**Goods and/or Services**

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Debtor **C.B. Services, Inc.**Case number (if known) **18-41527****Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

4.1 State of Texas
P.O. Box 13528, Capitol Station

Austin TX 78711-3528

Line 2.2☐ Not listed. Explain:

Debtor C.B. Services, Inc. Case number (if known) 18-41527

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts
5a. Total claims from Part 1	5a.	<u>\$81,490.96</u>
5b. Total claims from Part 2	5b. +	<u>\$414,423.83</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.	<div><u>\$495,914.79</u></div>

Fill in this information to identify the case:Debtor name C.B. Services, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXASCase number 18-41527
(if known)Chapter 11☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Storage Rental Agreement Contract to be ASSUMED	<u>A & F Storage</u> _____ _____ _____
2.2	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Contract for Highway 377, Colleyville, TX job Contract to be ASSUMED	<u>Glenn Cashion Construction</u> _____ _____ _____
2.3	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Contract for Culleoka 100LF - 12" casing for 6" water line job Contract to be ASSUMED	<u>Glenn Cashion Construction</u> _____ _____ _____
2.4	State what the contract or lease is for and the nature of the debtor's interest State the term remaining _____ List the contract number of any government contract _____	Lease of office located at 3317 Finley Road, Ste. 104, Irving, TX 75062 Contract to be ASSUMED	<u>Hieland Real Estate</u> _____ _____ _____

Debtor

C.B. Services, Inc.Case number (if known) **18-41527****Additional Page if Debtor Has More Executory Contracts or Unexpired Leases**

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.5	State what the contract or lease is for and the nature of the debtor's interest	Contract for Pottsboro, TX job Contract to be ASSUMED	Lynn Vessels Constuction
	State the term remaining		
	List the contract number of any government contract		
2.6	State what the contract or lease is for and the nature of the debtor's interest	Contract for Lindsey, TX job Contract to be ASSUMED	Lynn Vessels Constuction
	State the term remaining		
	List the contract number of any government contract		
2.7	State what the contract or lease is for and the nature of the debtor's interest	Contract for Denton Drive, Dallas, TX job Contract to be ASSUMED	N. Texas Contracting
	State the term remaining		
	List the contract number of any government contract		
2.8	State what the contract or lease is for and the nature of the debtor's interest	Contract for Hi-line Drive & Oaklawn Virgin Hotel, Dallas, TX job Contract to be ASSUMED	Saber Development
	State the term remaining		
	List the contract number of any government contract		
2.9	State what the contract or lease is for and the nature of the debtor's interest	Contract for TCU Frog Stadium job Contract to be ASSUMED	Tri Dal
	State the term remaining		
	List the contract number of any government contract		

Debtor C.B. Services, Inc. Case number (if known) 18-41527

Additional Page if Debtor Has More Executory Contracts or Unexpired Leases

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

List all contracts and unexpired leases		State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease
2.10	State what the contract or lease is for and the nature of the debtor's interest Contract for 8" Sewer Laterals TCU Frog Stadium job Contract to be ASSUMED State the term remaining List the contract number of any government contract	Tri Dal

Fill in this information to identify the case:Debtor name C.B. Services, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXASCase number
(if known) 18-41527☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors**12/15**

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

*Column 1: Codebtor**Column 2: Creditor***Name****Mailing address****Name***Check all schedules that apply:***2.1 W. Charles Bishop****540 Indian Creek**

Number Street

**Peoples United
Equipment Finance**
☒ D
☐ E/F
☐ G
Trophy Club

City

TX 76262

State ZIP Code

Fill in this information to identify the case:Debtor Name C.B. Services, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXASCase number (if known): 18-41527☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from Schedule A/B..... **\$128,500.00****1b. Total personal property:**Copy line 91A from Schedule A/B..... **\$816,284.76****1c. Total of all property**Copy line 92 from Schedule A/B..... **\$944,784.76****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D..... **\$665,913.17****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of Schedule E/F..... **\$81,490.96****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F..... **+ \$414,423.83****4. Total liabilities**Lines 2 + 3a + 3b..... **\$1,161,827.96**

Fill in this information to identify the case and this filing:Debtor Name C.B. Services, Inc.United States Bankruptcy Court for the: EASTERN DISTRICT OF TEXASCase number 18-41527
(if known)Official Form 202**Declaration Under Penalty of Perjury for Non-Individual Debtors**

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An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 08/10/2018
MM / DD / YYYY

X /s/ Charles Bishop
Signature of individual signing on behalf of debtor

Charles Bishop
Printed name

President
Position or relationship to debtor